

	Southern Regional Advisory Committee (RAC) Meeting October 30, 2008, Minutes 5:00 p.m. - 7:00 p.m. Holiday Inn – Waldorf, Maryland	
Agenda Item	Discussion	Decisions/Follow-up
Welcome & Introductions <ul style="list-style-type: none"> • Introduction of AIDS Administration Staff and Participants 	<ul style="list-style-type: none"> • Linda Fenlon, from Charles County Health Department, welcomed everyone to the last RAC meeting of this year. • Introductions occurred • Linda advised the group to refer to their handouts and review the minutes from September's meeting and to advice of any changes or corrections. Fahd Habeeb directed/referred to tonight's agenda in everyone's handouts. 	N/A
RAC Update <ul style="list-style-type: none"> • Overview of RAC • Meeting Purpose • 2009 Meeting Schedule 	<ul style="list-style-type: none"> • Fahd gave an overview of RAC. This year completes the second cycle or year of the RAC meetings. • The RAC meetings began as a means to assist and help the (State) AIDS Administration and to consider other avenues to address specific problems that clients may have • Fahd briefly went over the discussion section of the minutes pertaining to health care and other issues that clients have encountered. 	N/A
Prevention <ul style="list-style-type: none"> • MSM Supplement & MSM Strategic Plan • Transgender Response Team 	<ul style="list-style-type: none"> • Kip Castner – provided a power point presentation on MSM –“Men Who Have Sex with Men”. • Mission is “To reduce the transmission of HIV and help Marylanders with HIV/AIDS live longer and healthier lives. • CDC 's last estimate of national HIV incidence report was made in 1997. It is believed that the CDC's estimate in 1997 was actually too low. They are now working to help find the number of HIV position people who may not know they are infected. CDC is using the (STARHS) method, a blood test to determine antibodies and the level of the disease. This will help to learn if the infection is recent or older based on the level of antibodies. • CDC new incidence estimate –“MSM” represented the majority of new infections in 2006 was +53%. New HIV infections varied by age and race. Young black “MSM” were most impacted, while white MSM in their 30's and 40's rank next. • Strategic Plan for MSM – Input to the development of the Strategic Plan for Prevention among MSM will be gathered via focus groups and key informant 	N/A

	<p>interviews.</p> <ul style="list-style-type: none">• Rewriting Inner Scripts- (RISE) this is a new prevention intervention for African American MSM. RISE will shift the emphasis to mental health, offering clients opportunities to identify internalized oppression.• Linda Fenlon – Charles County Health Department is currently looking for a Facilitator to take on the role of prevention – and to work with RISE.					
<p>Review Regional Services</p> <ul style="list-style-type: none">• Regional Input from SCSN	<ul style="list-style-type: none">• Fahd Habeeb - HIV Care Prioritization for the use of Part B Funding – Southern Region• Fahd presented a power point presentation on the above. Below is a brief overview of the Maryland AIDS Administration MISSION and information regarding background and Part B Funding and Services; <p>Priorities for Use of Part B Funding:</p> <table><tr><th><u>Core Services</u></th><th><u>Support Services</u></th></tr><tr><td>Medical Case Mgmt. Primary Medical Care Oral Health Mental Health Medical Nutrition Therapy Substance Abuse</td><td>Child Care Services Emergency Financial Assistance Food bank/Home Delivered Meals Psychosocial Support Medical Transportation Outreach services Housing services Non-Medical Case Management</td></tr></table> <p>Fahd asked each guest to complete some information regarding:</p> <ul style="list-style-type: none">• Southern Region Quick Needs Assessment for State Fiscal Year 2010 (July 1, 2009-June 30, 2010)• Southern Region Prioritization/Ranking of Ryan White Part B Service Categories State Fiscal Year – 2009 (July 1, 2008 – June 30, 2009)	<u>Core Services</u>	<u>Support Services</u>	Medical Case Mgmt. Primary Medical Care Oral Health Mental Health Medical Nutrition Therapy Substance Abuse	Child Care Services Emergency Financial Assistance Food bank/Home Delivered Meals Psychosocial Support Medical Transportation Outreach services Housing services Non-Medical Case Management	N/A
<u>Core Services</u>	<u>Support Services</u>					
Medical Case Mgmt. Primary Medical Care Oral Health Mental Health Medical Nutrition Therapy Substance Abuse	Child Care Services Emergency Financial Assistance Food bank/Home Delivered Meals Psychosocial Support Medical Transportation Outreach services Housing services Non-Medical Case Management					

Year End Summary <ul style="list-style-type: none"> A Time to Reflect 	<ul style="list-style-type: none"> Fahd gave a timeline of the year past. Briefly discussed items for each month that meetings were held – January – March – May – September – October. Also discussed meetings attendance, daytime vs. evening meetings and how to improve attendance. Increase more evening meetings? Those were overall better attended. Linda discussed expenditures for 2008 (handout highlighting expenditures enclosed in packet). Community dialogue and information shared. Linda brought up the concern of prevention vs. services. Some of the purpose of these meetings, RAC is to promote prevention. Is this group or some in the group willing to work on prevention? 	<p>Increase evening meetings?</p> <p>Help is needed to promote RAC meetings in terms of prevention.</p>
Wrap Up <ul style="list-style-type: none"> Announcements Next Steps Evaluation Results 	<ul style="list-style-type: none"> Fahd and Linda provided a “Year in-Review”. <ul style="list-style-type: none"> What additional accomplishments were achieved in 2008? What is missing? What do we need to accomplish in 2009? Group Discussion followed regarding achievements and concerns. Co-Chairs – Linda Fenton and Fahd Habeeb thanked everyone for coming. Fahd mentioned the schedule for the next fiscal year meetings are also in everyone’s handouts. 	<p>Evaluation results will be shared in the future.</p>

Southern Region Prioritization/Ranking of
Ryan White Part B Service Categories
State Fiscal Year 2009 (July 1, 2008-June 30, 2009)

CORE MEDICAL SERVICES	Rank (given other funding streams and resources per service categories listed, rank how we should prioritize Part B funding for core medical services)
Medical Case Management (including Treatment Adherence)	1
Dental (Oral Health Care)	3 (tie)
Mental Health Services	3 (tie)
Substance Abuse Services Out-patient	6
Primary Medical Care (Outpatient/Ambulatory Health Services)	2
Medical Nutrition Therapy	5
<u>SUPPORT SERVICES</u>	Rank (given other funding streams and resources per service categories listed, rank how we should prioritize Part B funding for support services)
Non-Medical Case Management (formerly Client Advocacy)	4
Housing Services	1
Psychosocial Support Services	6
Emergency Financial Assistance	2 (tie)

Medical Transportation	2 (tie)
Outreach Services	7
Food Bank/Home Delivered Meals	5
Child Care Services	8